

BARCODE

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PASTED
تصویر پیسٹ کریں

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FOR
Deputy Commissioner Office Lakki Marwat
(DCOLM) (188)

PERSONAL DATA ذاتی معلومات

1. FULL NAME پورا نام Write all in CAPITAL																	
2. FATHER NAME والد کا نام Write all in CAPITAL																	
3. GENDER جنس	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	4. DATE OF BIRTH پیدائش کی تاریخ														
5. CNIC NUMBER قومی شناختی کارڈ نمبر																	
6. CNIC NUMBER Re-enter																	
7. MOBILE NUMBER موبائل فون نمبر	(+92)	0	3														
9. E-MAIL ADDRESS																	
10. PERMANENT ADDRESS Write all in CAPITAL موجودہ پتہ																	
11. DOMICILE PROVINCE رہائش گاہ کا صوبہ											12. DOMICILE DISTRICT رہائش گاہ کا ضلع						
13. RELIGION مذہب	MUSLIM مسلم <input type="checkbox"/>	NON MUSLIM غیر مسلم <input type="checkbox"/>	14. DISABILITY معذوری (Please attach Medical Certificate)		YES <input type="checkbox"/>		NO <input type="checkbox"/>										
15. CURRENT OCCUPATION موجودہ پیشہ	GOVERNMENT SERVANT (Please attach signed/stamped NOC) <input type="checkbox"/>	EX-SERVICEMAN (Please attach Pension Book/Certificate) <input type="checkbox"/>	PRIVATE SERVICE (Please attach Experience/job Letter) <input type="checkbox"/>	JOBLESS (Attach Signed Letter explaining reason) <input type="checkbox"/>													
16. ORPHAN یتیم (Please attach Orphan-Certificate)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please write down guardian's name with CNIC#														
A. POST SELECTION پوسٹ / پوسٹ منتخب کریں (Please mark only one post پراہ کرم صرف ایک پوسٹ کو منتخب کریں)																	
Junior Scale Stenographer (BPS-14) <input type="checkbox"/>										<input type="checkbox"/>							
<input type="checkbox"/>										<input type="checkbox"/>							
<input type="checkbox"/>										<input type="checkbox"/>							

Please do not damage this form by folding it and complete it with CAPITAL letters

براہ کرم اس فارم کو فولڈ کر کے ڈیمج نہ کریں، اور بڑے لیٹرز کے ساتھ مکمل کریں

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B. QUOTA SELECTION

(Please mark only one box برائے مہربانی صرف ایک باکس منتخب کریں)

KPK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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C. SPECIAL ALLOCATION SELECTION (IF ANY)

(Please mark only one box برائے مہربانی صرف ایک باکس منتخب کریں)(Please attach relevant documents as proof)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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C1. OTHER CATEGORY SELECTION (IF ANY)

(Please mark only one box برائے مہربانی صرف ایک باکس منتخب کریں)(Please attach relevant documents as proof)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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D. DESIRED TEST CENTER

(PTS will decide your final test center)(Please mark only one box برائے مہربانی صرف ایک باکس منتخب کریں)

Lakki Marwat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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D1. Special Instructions from the Department (if any)

* Candidate must only have Khyber Pakhtunkhwa Domicile of Lakki Marwat District to apply for the above mentioned post.

* Candidate must bring original documents at the time of Interview.

* Computer literacy is must for the above mentioned post.

E. AGE SELECTION DATA

(Please mark only one box برائے مہربانی صرف ایک باکس منتخب کریں)

Age 18-25	<input type="checkbox"/>	Age 25-35	<input type="checkbox"/>	Age 35-40	<input type="checkbox"/>	Age 40-50	<input type="checkbox"/>
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CAPITAL letters

براہ کرم اس فارم کو فولڈ کر کے ٹیمپ نہ کریں، اور بڑے لیٹرز کے ساتھ مکمل کریں



F. ACEDMIC / QUALIFICATION SELECTION DATA
(Please complete it properly) براہ کرم مکمل طور پر اور مناسب طریقے سے بھریں

Certificate /Degree Level	Degree Title	Year Passing	Obtained Marks / CGPA	Total Marks / CGPA	%age	Division	Institute/Board
Middle							
Matric (10 Years)							
Intermediate (FA/FSC) (12 Years)							
Bachelors (14 Years)							
Bachelors/BS (16 years)							
Masters (16+ years)							
M-Phil/MS							
Ph.D							

G. OTHER CERTIFICATION / DIPLOMA / COURSE / COMPUTER SKILLS DATA
(Please complete it properly) براہ کرم مکمل طور پر اور مناسب طریقے سے بھریں

Certificate /Diploma Level	Institution Name	Name of Diploma/Course & Certificate	Duration		Total Duration
			From	To	
Certificate					
Diploma					
Course					
Computer Skills					

H. JOB / PROFESSIONAL EXPERIENCE DATA
(Please complete it properly) براہ کرم مکمل طور پر اور مناسب طریقے سے بھریں

S.No#	Organization / Employer Name	Position (working As)	Job Duration Write only Month & Year		Total Period Of Experience
			From	To	
1					
2					
3					
4					

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GENERAL INSTRUCTIONS

GENERAL INSTRUCTION FOR APPLICATION FORM FOR TESTING (PTS)

Please fill this form as per instructions give below:

- Application form is free of charge and it's not for sale.
- Application form received after due date will not be considered.
- Application form which is incomplete or submitted by hand will not be entertained.
- Applicant age shall be calculated from the closing date of application.
- Candidates must attach clear photocopy of their CNIC (NADRA).
- Computer literacy is a must for all position except support staff.
- Applications carrying incorrect information shall be instantly rejected.
- Candidate should bring their original testimonials at the time of interview.
- Original signed letter from your employer stating name, position, salary, duration of employment, address and contact numbers of employer if already in job or jobless.
- Candidates should also attach photocopies of all supporting documents if required or mentioned in the advertisement {e.g. (SSC/Intermediate certificates recognized by board),(Degrees recognized by HEC), Domicile, Local Certificate or NOC etc.} in A4-sized (8.27" x 11.69")
- Candidature could be determined on the basis of applicants' personal data, domicile, qualification, professional experience and performance in test/s to be conducted by P.T.S.
- No TA / DA would be admissible for test/interview. However, test & interview is devised by the employer within their legal criteria & policy. Hence, only shortlisted candidates will be intimated for test, exam or interview.
- Please make sure that if any other person attempts to take the test, exam or interview in your place, both you and such person will be liable to prosecution. And details relating to the situation will be forwarded to the relevant employer and appropriate regulatory authorities.
- In case of any bogus/ false information or criminal record, selection shall stand withdrawn/cancelled immediately.
- Disabled persons, females, orphans, minorities or non-Muslims are encouraged to apply.
- Employer has right to alter/cancel the test, post, position and distribution of advertised vacancies.
- Deposited Testing Fee is non-refundable / nor-transferable.

Checklist:

I have signed the Application Form.

I have provided all the information required.

I have paid the test fee.

UNDERTAKING BY THE CANDIDATE

By signing below and submitting this Form, I _____ s/d/w of _____ do hereby declares that I have read General Instructions and the information I am providing in this form is accurate & true to my knowledge. In case of any information comprise herein found at any stage to be conceal, missing, untrue, false or forged, my candidature can be cancelled at any stage (even after employment, if so revealed later), and I shall be liable to any legal action against me. And I am using P.T.S. as Service Provider only so they will now stand liable for what I have signed in this form & result I obtain in after selection or test/s.

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Date & Thumb Impressions

Candidate's Signature

HELP LINE
051 111 111 787
www.pts.org.pk

PLEASE POST YOUR APPLICATION FORM FOR TESTING TO
PAKISTAN TESTING SERVICE
PTS Head Quarter, 3rd Floor, Adeel Plaza, Fazal-e-Haq
Road, Blue Area, Islamabad.

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If payment made through following transaction, mark checker box and attach proof of payment.

Online

Mobile Paise

Bank



<p align="center">Bank Deposit Slip (PTS Copy) Deputy Commissioner Office Lakki Marwat (DCOLM) (188)</p>		Branch Name: Branch Code:	
Habib Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA AC Number: 0042-79916572-03		United Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA AC Number: 225701041	
<p><small>Please note: 1. Desired Bank Stamp is required on the Deposit Slip or attach electronic receipt with deposit Slip. 2. Send Original Deposit Slip (PTS Copy) & application to PTS Office within due date.</small></p>			
Applicant Full Name (Plan/Product Code)		Post/Position Applied (Only for One Position)	
Father's Name		Deposited Amount	PKR
Mobile Number		Test Fee (Inclusive of all Govt. Taxes)	PKR. 300/- Amount in words PKR Three Hundred Rupees Only <small>(Non Refundable / Nor Transferable)</small>
CNIC Number (FRC, CRC or PV#)		Applicant's Signature	Cashier's Stamp



<p align="center">Pakistan Testing Service Bank Deposit Slip (Candidate Copy) Deputy Commissioner Office Lakki Marwat (DCOLM) (188)</p>	
Branch Code	Branch Name
Habib Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA AC Number: 0042-79916572-03	
Branch Code	Branch Name
United Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA AC Number: 225701041	
<p><small>Please note: Bank Stamp is required on the Deposit Slip or attach electronic receipt with deposit Slip. Send Original Deposit Slip (PTS Copy) & application form to PTS Office within due date.</small></p>	
Applicant Full Name (Plan/Product Code)	
Father's Name	
Mobile Number	
CNIC Number (FRC, CRC or PV#)	
Post/Position Applied (Only for One Position)	
Deposited Amount	PKR
Test Fee (Inclusive of all Govt. Taxes)	PKR. 300/- Amount in words PKR Three Hundred Rupees Only <small>(Non Refundable / Nor Transferable)</small>
Applicant's Signature	Cashier's Stamp
Pakistan Testing Service Head Quarters , 3rd Floor, Adeel Plaza, Fazl-e-Haq Road, Blue Area, Islamabad.	



<p align="center">Pakistan Testing Service Bank Deposit Slip (Bank Copy) Deputy Commissioner Office Lakki Marwat (DCOLM) (188)</p>	
Branch Code	Branch Name
Habib Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA AC Number: 0042-79916572-03	
Branch Code	Branch Name
United Bank Limited A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA AC Number: 225701041	
<p><small>Please note: Bank Stamp is required on the Deposit Slip or attach electronic receipt with deposit Slip. Send Original Deposit Slip (PTS Copy) & application form to PTS Office within due date.</small></p>	
Applicant Full Name (Plan/Product Code)	
Father's Name	
Mobile Number	
CNIC Number (FRC, CRC or PV#)	
Post/Position Applied (Only for One Position)	
Deposited Amount	PKR
Test Fee (Inclusive of all Govt. Taxes)	PKR. 300/- Amount in words PKR Three Hundred Rupees Only <small>(Non Refundable / Nor Transferable)</small>
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